	Date Filed:
]	License No:

City Hall, 38 Hawley Street, Binghamton, NY 13901 607-772-7005

## ALARM USER LICENSE APPLICATION

## Property Owner Information

Name:	
Address:	
Phone (Home/Work/Cell):	
Alarm User Information	
Name:	
Address:	
Phone (Home/Work/Cell):	
Additional Information	
Address where Alarm is located:	
Name of Alarm Installing Company:	
Type of Alarm: Burglar   Fire   Panic   Glass	Motion Sensor □
In the space below, provide detailed information on the alarm system installed on y type of device and location on property.	
By signing below, I indicate that I agree to comply with all terms of the Code of the City of Bing <i>Systems</i> , along with any subsequent amendments. I am aware that, upon receipt of this form by the charge for the first two avoidable alarms in any given calendar year, but I will be charged for each also understand that if an alarm is not paid within thirty days from the date of the invoice, addition unpaid alarms will roll to the property owner's taxes and will also receive a surcharge. It is the ronotify the property owner of any and all alarm installations. Any change to the alarm system or challing address or building tenants will require the alarm user and property owner to complete a new state.	e City Clerk there will be no avoidable alarm thereafter. I nal penalties will occur. Any esponsibility of the tenant to lange in property ownership.
Applicant Signature	Date